

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003				Application or Docket Number 10057225		
CLAIMS AS FILED - PART I						
(Column 1)		(Column 2)				
TOTAL CLAIMS		NUMBER FILED	NUMBER EXTRA			
FOR		minus 20 =				
TOTAL CHARGEABLE CLAIMS		minus 3 =				
INDEPENDENT CLAIMS						
MULTIPLE DEPENDENT CLAIM PRESENT				<input type="checkbox"/>		
* If the difference in column 1 is less than zero, enter "0" in column 2						
CLAIMS AS AMENDED - PART II						
(Column 1)		(Column 2)		(Column 3)		
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA			
	Total	36	30	6		
	Independent	7	7			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>					
SMALL ENTITY TYPE <input type="checkbox"/> OR OTHER THAN SMALL ENTITY						
RATE		FEE				
BASIC FEE		385.00		OR BASIC FEE 770.00		
XS 9 =				OR XS18 =		
X43 =				OR X86 =		
+145 =				OR +290 =		
TOTAL				OR TOTAL		
SMALL ENTITY OR OTHER THAN SMALL ENTITY						
RATE		ADDITIONAL FEE				
XS 9 =				OR XS18 = 108		
X43 =				OR X86 =		
+145 =				OR +290 =		
TOTAL				OR TOTAL 108		
AMENDMENT B						
(Column 1)		(Column 2)		(Column 3)		
CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA			
Total	36	34	↓			
Independent	7	7	↓			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>						
SMALL ENTITY OR OTHER THAN SMALL ENTITY						
RATE		ADDITIONAL FEE				
XS 9 =				OR XS18 =		
X43 =				OR X86 =		
+145 =				OR +290 =		
TOTAL				OR TOTAL		
AMENDMENT C						
(Column 1)		(Column 2)		(Column 3)		
CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA			
Total						
Independent						
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>						
SMALL ENTITY OR OTHER THAN SMALL ENTITY						
RATE		ADDITIONAL FEE				
XS 9 =				OR XS18 =		
X43 =				OR X86 =		
+145 =				OR +290 =		
TOTAL				OR TOTAL		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.						

FORM PTO-575 (Rev. 10/03)

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